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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	1163UB00US00
First Named Inventor	Alexander Lipton
COMPLETE IF KNOWN	
Application Number	Unknown
Filing Date	Herewith
Art Unit	Unknown
Examiner Name	Unknown

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEMS AND METHODS FOR MODELING SECURITY RISKS OF PUBLICLY TRADED COMPANIES

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, Inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, Inventor's or plant breeder's rights certificate(s), or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number _____ Correspondence address below

Name Axiom Legal Solutions c/o PortfolioIP

Address P.O. Box 52050

City Minneapolis

State MN

ZIP 55402

Country US

Telephone 203-438-1077

Fax 866-422-4530

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

A petition has been filed for this unsigned inventor

Given Name Alexander
(first and middle [if any])

Family Name Lipton
or Surname

Inventor's
Signature

Alexander Lipton

Date 07/24/2003

Residence: City New York

State NY

Country US

Citizenship US

Mailing Address 120 East 87th Street, Apt. R16A

City New York

State NY

ZIP 10128

Country US

NAME OF SECOND INVENTOR:

A petition has been filed for this unsigned inventor

Given Name Jonathan Z.
(first and middle [if any])

Family Name Song
or Surname

Inventor's
Signature

Date

07/24/03

Residence: City New York

State NY

Country US

Citizenship CA

Mailing Address 172 East 4th Street, Apt. 7B

City New York

State NY

ZIP 10009

Country US



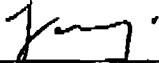
Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Shinghai		Lee	
Inventor's Signature			Date 07/24/2003
Residence: City West Windsor	State NJ	Country US	Citizenship NZ
Mailing Address B Meridian Court			
Mailing Address			
City West Windsor		State NJ	Zip 08550
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Inventor's Signature			
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City		State	Zip
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City		State	Zip

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.69. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT

Application Number	Unknown
Filing Date	Herewith
First Named Inventor	Alexander Lipton
Title	SYSTEMS AND METHODS FOR MODELING SECURITY RISKS OF PUBLICLY TRADED COMPANIES
Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	1183UB00US00

I hereby appoint:

 Practitioners at Customer Number


Place Customer
Number Bar Code
Label here

OR

 Practitioner(s) named below:

Name	Registration Number
Brandt, Jeffrey L.	31,490

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number.

OR

 Practitioners at Customer Number.


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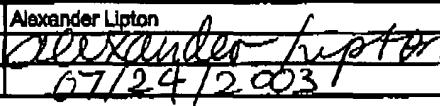
OR

<input checked="" type="checkbox"/> Firm or Individual Name	Axiom Legal Solutions c/o PortfolioIP			
Address	P.O. Box 52050			
Address				
City	Minneapolis	State	MN	Zip
Country	United States of America			
Telephone	203-438-1077	Fax	868-422-4530	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Alexander Lipton		
Signature			
Date	07/24/2003	Telephone	(202) 538-8868

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

<input checked="" type="checkbox"/> Total of	3	forms are submitted.
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This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Examiner Name	Unknown
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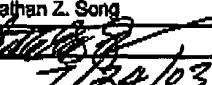
OR

<input checked="" type="checkbox"/>	Firm or Individual Name	Axdom Legal Solutions c/o PortfolioIP	
Address	P.O. Box 62050		
Address			
City	Minneapolis	State	MN
Country	United States of America		
Telephone	203-438-1077	Fax	866-422-4530

I am the:

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Jonathan Z. Song
Signature	
Date	7/20/03

Telephone

212-320-1768

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of 3 forms are submitted.

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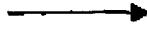
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Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	1183UB000US00

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OR

 Practitioner(s) named below:

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Brandt, Jeffrey L.	31,490

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OR

 Practitioners at Customer Number.
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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Axiom Legal Solutions c/o PortfolioIP		
Address	P.O. Box 52050		
Address			
City	Minneapolis	State	MN
Country	United States of America		
Telephone	203-438-1077	Fax	866-422-4530

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SIGNATURE of Applicant or Assignee of Record

Name Shinghoi LeeSignature Date 7/24/2003Telephone (212)3254335

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of 3 forms are submitted.

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If you need assistance in completing the form, call 1-800-PTO-8199 and select option 2.

AND, furthermore, we covenant and agree with said Assignee, its successors and assigns, that no assignment, grant, mortgage, license or other agreement affecting the rights and property herein conveyed has been made to others by us and that full right to convey the same as herein expressed is possessed by us.

IN TESTIMONY WHEREOF, I have hereunto set my hand this 24 day of
July, 2003.

Alexander Lipton

Alexander Lipton

STATE OF New York,
COUNTY OF New York)
ss

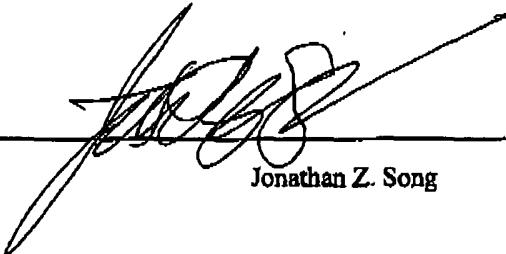
On this 24 day of July, 2003 before me personally appeared Alexander Lipton, to me known and known to me to be the person described in and who executed the foregoing instrument, and he/she duly acknowledged to me that he/she executed the same for the uses and purposes therein set forth.

[SEAL]

Juliebeth Albano LaSalla
Notary Public

Juliebeth Albano LaSalla
Notary Public, State of New York
No. 01AL5084387
Qualified in Nassau County
Commission Expires Sept. 02, 2005

IN TESTIMONY WHEREOF, I have hereunto set my hand this 24 day of
July, 2003.



Jonathan Z. Song

STATE OF NEW YORK
COUNTY OF NEW YORK ^{ss}

On this 24 day of July, 2003 before me personally appeared Jonathan Z. Song, to me known and known to me to be the person described in and who executed the foregoing instrument, and he/she duly acknowledged to me that he/she executed the same for the uses and purposes therein set forth.

[SEAL]



Juliebeth Albano LaSalla
Notary Public

Juliebeth Albano LaSalla
Notary Public, State of New York
No. 01AL5084397
Qualified in Nassau County
Commission Expires Sept. 02, 2005

IN TESTIMONY WHEREOF, I have hereunto set my hand this 24th day of
July, 2003.

STATE OF New York)
COUNTY OF New York)

Shinghoi Lee

On this 24 day of July, 2003 before me personally appeared Shinghoi Lee, to me known and known to me to be the person described in and who executed the foregoing instrument, and he/she duly acknowledged to me that he/she executed the same for the uses and purposes therein set forth.

[SEAL]

Jillibeth Albano-Carillo
Notary Public

Juliebeth Albano LaSalla
Notary Public, State of New York
No. 01AL5084387
Qualified in Nassau County
Commission Expires Sept. 02, 2005